

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AS	943	5-16-1
RESPONSE FORMALITY REVIEW	SE	897	06-07-02
	JS	906	08/26/02
			10-10-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	
1	3-1-03
2	2-19-03
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20	N
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	2-3-02
52	2-3-02
53	2-3-02
54	2-3-02
55	2-3-02
56	2-3-02
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58	2-3-02
59	2-3-02
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94	2-3-02
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97	2-3-02
98	2-3-02
99	2-3-02
100	2-3-02

Claim	Date
Final	
Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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6007
 373 06/07
 5302
 2/1/00